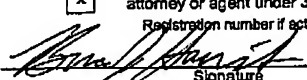


PTO/SB/22 (10-04)

Approved for use through 7/31/2008, OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 22197-00009-US	
Application Number 10/052,358-Conf. #3388		Filed January 23, 2002	
For PIPE COUPLINGS			
Art Unit 3679		Examiner A. M. Dunwoody	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a) <u>46,750</u>			
		November 29, 2004	
Signature		Date	
Brian J. Hairston		(202) 331-7111	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

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PTO/SB/17 (11-04)
Approved for use through 7/31/2006. QMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004, Patent fees are subject to annual revision.

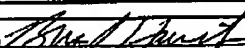
☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$) 110.00
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Complete If Known	
Application Number	10/052,358-Conf. #3388
Filing Date	January 23, 2002
First Named Inventor	Fatollah Yousefifar
Examiner Name	A. M. Dunwoody
Art Unit	3679
Attorney Docket No.	22197-00009-US

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> None Deposit Account Number: 22-0185 Deposit Account Name: Connolly Bove Lodge & Hutz LLP The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments To the above-identified deposit account. <input type="checkbox"/> Other (please identify): _____	FEE CALCULATION (continued) 2. EXTRA CLAIM FEES <table border="1" style="width: 100%;"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20</td> <td>18</td> <td>9</td> </tr> <tr> <td>Each independent claim over 3</td> <td>88</td> <td>44</td> </tr> <tr> <td>Multiple dependent claims</td> <td>300</td> <td>150</td> </tr> <tr> <td>For Reissues, each claim over 20 and more than in the original patent</td> <td>18</td> <td>9</td> </tr> <tr> <td>For Reissues, each independent claim more than in the original patent</td> <td>88</td> <td>44</td> </tr> <tr> <td>Total Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> </tr> <tr> <td colspan="3">- 20 or HP = _____</td> </tr> <tr> <td colspan="3">HP = highest number of total claims paid for, if greater than 20</td> </tr> <tr> <td>Indep. Claims</td> <td>Extra Claims</td> <td>Fee (\$)</td> </tr> <tr> <td colspan="3">- 3 or HP = _____</td> </tr> <tr> <td colspan="3">HP = highest number of independent claims paid for, if greater than 3</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td>Fee (\$)</td> <td>Fee Paid (\$)</td> </tr> <tr> <td colspan="2">Subtotal (2)</td> <td>\$ 0.00</td> </tr> </tbody> </table>	Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	18	9	Each independent claim over 3	88	44	Multiple dependent claims	300	150	For Reissues, each claim over 20 and more than in the original patent	18	9	For Reissues, each independent claim more than in the original patent	88	44	Total Claims	Extra Claims	Fee (\$)	- 20 or HP = _____			HP = highest number of total claims paid for, if greater than 20			Indep. Claims	Extra Claims	Fee (\$)	- 3 or HP = _____			HP = highest number of independent claims paid for, if greater than 3			Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	Subtotal (2)		\$ 0.00
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SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	46,760
Name (Print/Type)	Brian J. Halston	Date	November 29, 2004